

# STATE OF WISCONSIN Division of Hearings and Appeals

In the Matter of

DECISION

MDD/150831

## **PRELIMINARY RECITALS**

Pursuant to a petition filed June 07, 2013, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Disability Determination Bureau (DDB) in regard to Medical Assistance, a hearing was held on August 28, 2013, at Milwaukee, Wisconsin.

The issue for determination is whether the Division of Hearings and Appeals has jurisdiction to address the merits of Petitioner's request for Medicaid benefits.

There appeared at that time and place the following persons:

#### PARTIES IN INTEREST:

Petitioner:



Interpreter: family friend

Respondent:

Department of Health Services 1 West Wilson Street Madison, Wisconsin 53703 By: DDB file

ADMINISTRATIVE LAW JUDGE:

Mayumi M. Ishii Division of Hearings and Appeals

#### **FINDINGS OF FACT**

- 1. Petitioner is a resident of Milwaukee County.
- 2. On December 13, 2012, Petitioner applied for Regular Disability-based Medicaid, alleging that he is completely disabled due to cardiac/heart issues. (DDB file; Petitioner's testimony)

- 3. At about the same time, Petitioner applied for Social Security Disability Income (SSDI), alleging that he is disabled by a cardiac/heart condition. (Testimony of Petitioner)
- 4. On April 26, 2013, the Social Security Administration (SSA) denied Petitioner's application for SSDI. (DDB file, Testimony of Petitioner)
- 5. On May 1, 2013, the Disability Determination Bureau (DDB) denied Petitioner's application. (DDB file, Testimony of Petitioner)
- 6. On June 7, 2013, the Petitioner sought reconsideration, but the DDB affirmed its original determination on July 22, 2013 and on July 23, 2013, the DDB forwarded the file to the Division of Hearings and Appeals for administrative review. (DDB file; Petitioner's testimony)
- 7. Petitioner's medical condition has not changed since he was denied SSDI by the SSA on April 26, 2013. (Petitioner's testimony)

### **DISCUSSION**

It is a well-established principle that a moving party generally has the burden of proof, especially in administrative proceedings. <u>State v. Hanson</u>, 295 N.W.2d 209, 98 Wis. 2d 80 (Wis. App. 1980). In a case involving an application for assistance, the applicant has the initial burden to establish he or she met the application requirements.

A person between ages 18 and 65, with no minor children, must be blind or disabled to be eligible for MA. A finding of disability must be in accordance with Federal Social Security/SSI standards. *See Wis. Stats. §49.47(4)(a)4.* Because the standards are the same, a finding of no disability for Social Security/SSI purposes made within 12 months of the Medicaid application is binding on a State Medicaid agency. Exceptions may occur only if certain conditions exist. Specifically, the Division of Hearings and Appeals has no authority to find a Petitioner disabled unless he or she:

- (i) Allege[s] a disabling condition <u>different from</u>, or in addition to, that considered by SSA in making its determination; or
- (ii) [The MA application is more than 12 months after the most recent SSA determination]; or
- (iii) Alleges less than twelve months after the most recent SSA determination denying disability that his or her condition has <u>changed or deteriorated</u> since that SSA determination, alleges a new period of disability which meets the original durational requirements of the Act, <u>and</u>
  - (A) Has applied to SSA for reconsideration or reopening of its disability decision and SSA refused to consider the new allegations.

42 CFR 435.541(c)(4)(emphasis added).

Here, Petitioner applied for Social Security Disability Income benefits at about the same time he applied for regular disability-based Medicaid benefit. Both applications were based upon the same disabling conditions. The SSA denied Petitioner's request for SSDI benefits within 12 months of his application for Medicaid. Petitioner's condition has not changed since he was denied Social Security Disability Benefits on April 26, 2013. Consequently, the SSA's decision is binding and the Division of Hearings and Appeals does not have the authority to address the merits of Petitioner's application for disability-based Medicaid benefits.

Petitioner expressed a great deal of concern/worry about the loss of his health care coverage, because he needs follow-up medical care and heart medications. Petitioner's concerns are understandable.

Petitioner should note that beginning October 1, 2013, he can apply for assistance through the Obamacare Health Insurance Markets/Exchanges. For assistance, Petitioner can call:

1- or go on-line to www.healthcare.gov

Petitioner should note, however, that there is not likely to be much useful information available prior to October 1, 2013.

There is also a listing of free and reduce cost clinics at <a href="http://city.milwaukee.gov/medassist/Free-and-Lowcost-Clinics-in-Milwaukee">http://city.milwaukee.gov/medassist/Free-and-Lowcost-Clinics-in-Milwaukee</a> that Petitioner might find useful.

#### **CONCLUSIONS OF LAW**

That the Division of Hearings and Appeals does not have the authority to address the merits of Petitioner's application for disability-based Medicaid benefits where there is a Social Security Administration denial of disability within 12 months of the Medicaid application.

#### THEREFORE, it is

#### **ORDERED**

That the petition is dismissed.

## REQUEST FOR A REHEARING

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as "PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

#### APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Milwaukee, Wisconsin, this 29th day of August, 2013.

\sMayumi M. Ishii Administrative Law Judge Division of Hearings and Appeals



## State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on August 29, 2013.

Milwaukee Enrollment Services Disability Determination Bureau